New England Deaconess Hospital

pulse

185 Pilgrim Road, Boston, Massachusetts

November-December 1986

Attitude survey allows employees to speak their minds

Everybody has opinions. About politics, work, the Red Sox, cars, the best way to get from Dorchester to Everett, Coke vs. Pepsi. People also are asked their opinions regularly, to get information that is useful for the future of a product, a person, an issue, or an institution. Voters are questioned after they leave the polls; telephone surveyors call to ask about new products; consumers are interviewed at malls about shopping habits, and so on.

The Deaconess is interested in opinions, too, and is holding an eight-day survey period to ask employees what they think about "life at the Deaconess." Its purpose is to learn how employees feel about the hospital's policies and practices, and about their own jobs, their supervisors, and their working relationships with other people and departments.

"The key to making the survey work is to have 100 percent participation," says Jane Barry, assistant director of Human Resources. "We need everybody to take the survey if the findings are to be used as representative of the overall opinion of Deaconess people."

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— Jane Barry, assistant director of Human Resources

Because participation is so important, the survey will be available almost around the clock (see box for times and locations), and it is to be completed on hospital time.

Barry says that the process is simple: "Every hour on the hour, we'll start another group, composed of whoever happens to walk into the room. There will be a couple of 'proctors' there to hand out the surveys and to answer questions. But once the survey is in an employee's hands, no one else will see it. When finished, the employee puts his or her survey into a sealed box."

All the surveys will be sent to Kansas City to be compiled, and the hospital will get back only summarized results for similar groups of employees, for larger departments, and for the hospital as a whole. No one at the hospital will be able to trace a survey to a particular employee, so the confidentiality of the surveys is guaranteed. "We would like employees to feel comfortable that they can say whatever they want — be completely honest — with no concern about their answers being made public to anyone," says Barry.

Obviously, there are two parts to the survey process — getting the information (described above), and receiving and acting on the results. "Whether the news is good or bad, results of the survey will be shared with employees," says Dean Manheimer, director of Human Resources. "In addition to letting employees know the outcome, we also will let employees know what actions we can take to correct problems that are identified through the survey.

"We hope this will be a learning process for everyone," says Manheimer, "and one that will bear fruit for the future benefit of all of us at the Deaconess."

In a nutshell . . .

Who?
All Deaconess employees, except physicians and house officers.
What?
An employee attitude survey to gather the honest, confidential opinions of those who are a part of "life at the Deaconess." The survey is a multiple-choice questionnaire with 69 statements plus space at the end for written comments. No names are written on surveys, and completed questionnaires are dropped by employees into a sealed box. Completed surveys will be sent to Kansas City for compilation by the firm of Management Science Associates, Inc.
When?
Tuesday, November 4 until Wednesday, November 12 at 5 a.m., every hour on the hour from 6 a.m. to 6 p.m., 9 p.m. to 11 p.m., and 2 a.m. to 5 a.m. The survey is to be taken during the regular working hours of employees.
Where?
Department of Medicine conference room, Harris Hall ground floor (across the hall from Human Resources). During the night shift, surveys will be completed in the Farr Lobby.
How long?
Because some people may wish to add written comments, the time needed for the survey will vary. Some may be done in 10-15 minutes, while others may take 30-40 minutes.

Department of Medicine receives full teaching status at Harvard

On September 1 the NEDH Department of Medicine received full status as an academic department at Harvard Medical School. "This is a major achievement, one we have been working toward for five years," says Laurens MacLure, hospital president.

Robert C. Moellering, M.D., chairman of the Department of Medicine, says, "As a result of this designation, we are accorded the same status as the other major teaching hospitals — Mass. General and the combined Brigham/Beth Israel program. We now have the ability to recommend academic appointments and promotions directly to the Medical School." Previously, appointments were made through the Brigham Department of Medicine.

The awarding of full appointing status recognizes major developments in the Department of Medicine over the past several years, including the addition of many full-time staff members, establishment of new research programs, and strengthening of the teaching programs for house staff and medical students.

To coordinate the department's increased responsibilities for medical student teaching, Lee Simon, M.D., has been appointed assistant to the chairman for undergraduate medical education.

"In the past we had only second-year students here, along with a few fourth-year students taking electives," says Simon. "Now students at all four levels will be learning at the Deaconess. We already have some first-year students in the 'New Pathway' program who will be staying with us into their second year. The fourth-year advanced ward medicine elective will be enhanced to more of a sub-internship, and next July we'll be adding a core medical clerkship for third-year students."

Moellering says, "The full status speaks very well of the people in our department; it says that the Medical School views us as a full-time academic department. But I feel very strongly that we can't rest on our laurels now. It helps the hospital to have this recognition, and we need to use it as a step from which we will continue to build."

New Admitting area welcomes Deaconess patients

"This space was planned first of all for the needs of our patients, but those of us who work here will benefit too," says Bill Flatley, manager of Admitting, about the renovated Admitting area on Farr 1.

During the five-month renovation, completed in September, Engineering and Maintenance completely gutted and rebuilt the Admitting area. The new space is designed around an enlarged waiting area for patients and family members.

"The old waiting room was small and offered no privacy for patients, who usually are very apprehensive at the time of admission," Flatley says. In the new area, chairs are arranged in small private groupings, separated by large plants.

"It is a more pleasant, efficient place to work." — Bill Flatley, manager of Admitting

Jean Champagne (right) and Amy Phillips, admitting officers, confer at the reception desk in the new patient waiting room.

Although the interview rooms and booking office are small, new furniture allows more effective use of available space. "The morale of our employees is higher because it is a more pleasant, efficient place to work," says Flatley.

Admitting procedures also have been revised over the past year. A new preadmission testing program allows many patients to have necessary lab tests done on an outpatient basis, which reduces length of stay and makes the day of admission less complicated.

"Although we have a large waiting room now, we don't want to have a full one," Flatley says. "Through the use of preadmissions and proper scheduling, we're trying to reduce the amount of time our patients spend waiting. But if things do get delayed, they now have a more pleasant place to wait."

The renovation project was supported by a $65,800 gift from the Friends of the Deaconess.

Committee is sounding board for employee ideas

This past spring, the Deaconess sponsored a management retreat for administrative officers, support staff, and some department heads. The retreat provided an open forum for members of administration to discuss problems and concerns facing the hospital today. Participants considered a number of options for increasing patient volume and profit margins, initiating a formal guest relations program, and generating new ideas to solve problems and help the hospital meet its long- and short-term goals.

David Lilley, associate director for Operations, says, "We wanted to establish a method for getting employees at all levels to think about ways to increase productivity, cut costs, and enhance patient and guest relations." The plan they devised was forming a "new ideas committee."

The program is simple: any employee who has an idea about how to cut costs, to improve guest relations, or to make a system work more productively submits a half-page proposal to the committee. (Forms are available from committee members or department heads.) Committee members Margaret Lahey, staff assistant to the director; Richard Lee, hospital director; Lilley; and Judith Miller, associate director for Nursing, review the idea, discussing its pros and cons. If necessary, they talk with departments or areas that might be affected by implementing the idea. After deciding whether the idea will be approved, the committee responds to the employee who submitted the idea as quickly as possible.

Says Lilley, "We feel that anyone could have an idea that would benefit the hospital. When you think about it, it is the people in the organization, working in the areas where problems occur, who often have the best ideas for solving those problems."

The committee held its first weekly meeting on May 5. A number of ideas submitted already have been approved. One idea, the Guest Quarters program which began September 2, offers patients being admitted for tests or minor surgery the opportunity to spend the night before admission in "guest quarters" in Kennedy Hall.

Another suggestion — to identify the lobby level in the Farr elevators clearly — was approved and will be implemented this fall. A proposal under consideration is to change administrative titles such as director, associate director, and department director to ones that are less confusing and more clearly indicate the administrator's level of responsibility.

Lilley says, "So far the response has been encouraging. We've received a good cross-section of ideas; some employees have submitted a number of proposals to the committee, but we know there are other employees out there who have thoughtful ideas about how the hospital could work better. We'd like to encourage everyone to take advantage of this opportunity to have an idea heard and responded to."

Deaconess employees enjoyed a 90-cent lunch at the employee picnic in September. More than 1,500 attended the event, part of the hospital's 90th anniversary celebration.

Engineering and Maintenance employees have hidden talents

Is there life after work? Just ask two local artists, who also happen to be employees in the hospital's Engineering and Maintenance Department. Steve Palsic, a caricaturist, has worked at the Deaconess since 1982; painter Raymond Merva is an eight-year Deaconess veteran.

Palsic, a general repairman at the hospital, is a self-proclaimed "napkin drawer." His specialty is drawing caricatures and it is a talent that runs in his family. "We're all alike," Palsic says. "We sit at the table and doodle on our napkins after dinner. My mother is really good at it."

Palsic says he draws, "because it's something to do to pass the time. I just look for the outstanding features in a person and then blow those features out of proportion when I draw them." He is very generous with his talent and has done many drawings for co-workers and other hospital employees. "I don't keep my work. I'd have stacks and stacks of it, and I just don't have the space," he says. Most recently, he worked with the Employee Health Clinic on a poster promoting the flu vaccine program.

His willingness to share the fruits of his doodling and his casual attitude about his artwork make it more of an enjoyable pastime than a serious endeavor for Palsic. But his drawings are definitely appreciated by everyone he shares them with.

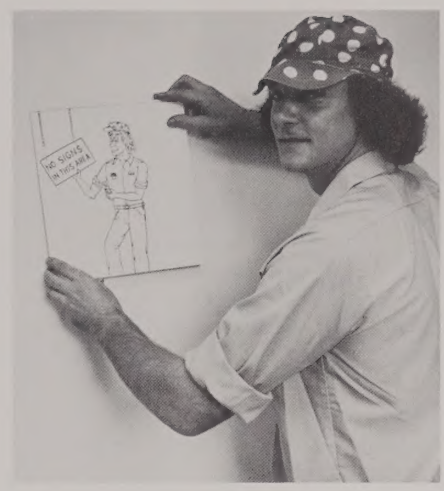
"When I go into Pilgrim's Korner to have a cup of coffee, I'll start drawing on my napkin," he says. "When I leave, the cup gets thrown away, but I leave the drawing on the table for the next person to enjoy."

Raymond Merva, a painter and wallpaperer, began painting long before he came to the Deaconess. He first discovered his talent in high school and entered a community art show during his senior year with a rather unusual submission: the view from the inside of a wall socket. Even the frame of the picture was socket-shaped. This imagination is still very much alive in his work.

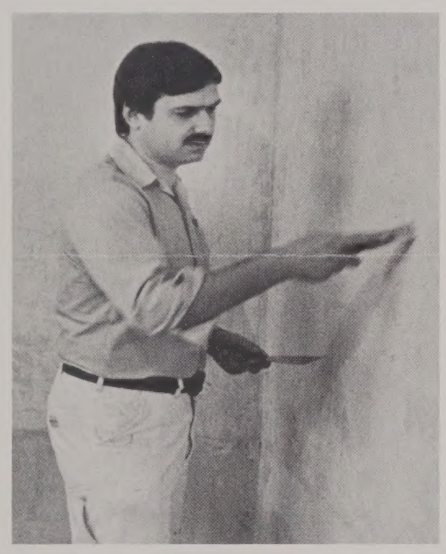
Merva graduated from the University of Bridgeport in Connecticut with a bachelor's degree in fine arts. He has done painting, wallpapering, and related work since then. He also has taught adult education courses in painting and drawing. "A lot of people have helped, and given me lots of information and advice. I feel an obligation to give it back and help people with whatever they want to know," he says.

Though the Deaconess is where Merva makes his living, his life after work revolves around art. He works in charcoal, oils, ink, pastels, clay, and photography, and the styles of his work are as varied as the different media he uses. His work has been shown in galleries in Worcester, where he now lives, and in Maryland, Virginia, New York City, and Connecticut.

Merva likes his work at the Deaconess, especially having taken part in the recent renovations on Baker 5 and Farr 1. "In my paintings and drawings I have total control over what I do from beginning to end," he says. "What I do at the hospital is usually just one part of a project. It takes lots of people to complete it, but it's a good feeling to be a part of it and see the final result."



Repairman Steve Palsic draws caricatures of his family, his coworkers, and even himself.



Raymond Merva (far left) works on the Admitting renovation. His paintings range from abstract works to more realistic pieces, like a portrait of his dog, *Twilight* (near left).

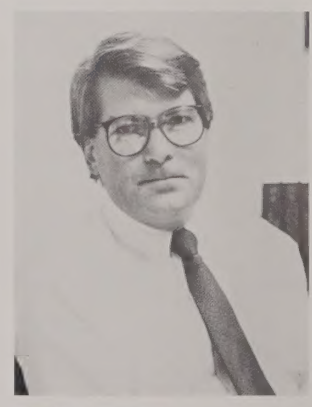
Maureen Hogan (right), recreation therapist, helps patient Chris Stein try out a new treadmill in the Diabetes Treatment Unit. Joslin teaching nurses, employees, and patients held a bike-a-thon to purchase the device for the DTU.

Govern heads administration for JCRT

Frank S. Govern has been appointed director of Administration for the Joint Center for Radiation Therapy (JCRT). The largest radiation therapy treatment and research center in New England, the JCRT provides radiation therapy services for the Longwood Medical Area's Harvard Hospitals — the Deaconess, Beth Israel, Brigham and Women's, and The Children's Hospitals, and the Dana-Farber Cancer Institute.

Govern's responsibilities include the day-to-day operation and administrative management of the JCRT and coordination of programs with the member hospitals. "I was attracted to this position because the JCRT is a unique organization, an institution without walls," he says. "The director of Administration interfaces in some degree with all five hospitals on a daily basis. It offers a special and complex challenge."

Previously president of Charles River Hospital, a psychiatric facility in Wellesley, Govern also has managed acute-care, general hospitals in Pennsylvania and Virginia for Hospital Corporation of America. A member of the American College of Health Care Executives, he is a graduate of Salem (Massachusetts) State College and received a master's in administrative science from Johns Hopkins University.



Frank S. Govern

news in brief

Lloyd Aiello, M.D., and **Lawrence Rand, M.D.,** ophthalmologists, spoke at a meeting of the National Eye Institute Early Treatment Diabetic Retinopathy Study. Aiello coauthored an article on laser photocoagulation of the eye in *Clinical Diabetes.*

Kimball C. Atwood, IV, M.D., has joined the Department of Anaesthesia.

Rosemary Ananis, M.S.W., social worker, has been elected president of the Social Work Oncology Group of Greater Boston. **Pam Glass, M.S.W.,** social worker, was named chair of the organization's nominating committee.

Richard J. Baptista, M.S., R.Ph., manager of Deaconess Home Health Care, spoke on cimetidine and parenteral nutrition to a symposium on the treatment of ulcer disease sponsored by the American College of Clinical Pharmacy.

Carol Darling, M.T. (A.S.C.P.) S.B.B., Blood Bank, presented a paper on the positive direct antiglobulin test due to anti-formaldehyde antibodies at the national meeting of the American Association of Blood Banks.

F. Henry Ellis Jr., M.D., chief of thoracic and cardiovascular surgery, presented a paper on esophagogastrectomy for cancer at the International Cancer Congress in Hungary. He also moderated a panel on surgery for esophageal carcinoma and presented two papers at the International Society of Diseases of the Esophagus meeting in West Germany.

Steven R. Goldring, M.D., chief of rheumatology, was a guest speaker at the Gordon Research Conference, discussing mechanisms of skeletal tissue destruction in inflammatory diseases.

Frank A. Greco, M.D., has joined the Department of Pathology as director of the radioisotope lab. He is a graduate of the NEDH pathology residency program.

Jerome P. Groopman, M.D., chief of hematology/oncology, spoke on the biology and epidemiology of AIDS, along with prospects for treatment and a vaccine, at a symposium held in conjunction with Harvard University's 350th anniversary.

Thomas C. Hill, M.D., chief of nuclear medicine, spoke on functional brain imaging with perfusion tracers at a symposium on SPECT in clinical practice sponsored by the American College of Nuclear Physicians and the Society of Nuclear Medicine.

Robert Kane, M.D., radiology, discussed a study of the efficacy of B-scan sonography in the detection of deep venous thrombosis of the leg at the annual meeting of the American Institute of Ultrasound.

Richard E. Lee, hospital director, was elected president of the Hospital Superintendents Club of New England.

Susan Levine, M.S., R.D., education coordinator, Dietetics, coauthored with **John D'Elia, M.D.,** nephrologist, and **Bruce Bistrian, M.D.,** internist/nutrition, an article on the nutrition status of diabetic and non-diabetic patients after kidney transplantation in the *American Journal of Clinical Nutrition.*

William Lockard, M.D., administrative pathologist, spoke on the national inservice exam for pathology residents to the national meeting of Residency Program Directors in Pathology.

Dean F. Markham Jr., M.D., infectious disease, has joined the Department of Medicine. He is a former NEDH chief medical resident and recently completed an infectious disease fellowship at Yale.

Anthony P. Monaco, M.D., chief of organ transplantation, was inaugurated as president of the International Transplantation Society at its international congress in Finland. Monaco and **Takashi Maki, M.D., Ph.D.,** member, Cancer Research Institute, have received a grant to study islet cell transplantation from the American Diabetes Foundation.

Linda Mondor, M.T., (A.S.C.P.) S.B.B., Blood Bank, received the 1986 Fenwall Scholarship from the American Association of Blood Banks for her paper on the effect of liver transplantation on ABO and Lewis blood antigens.

William V. McDermott Jr., M.D., surgeon, gave the presidential address on surgery in East Africa to the annual meeting of the New England Surgical Society.

Diane Nelson, R.N., unit teacher in the CCU and MICU, has been certified by the American Association of Critical Care Nurses.

Richard W. Nesto, M.D., cardiologist, participated in a symposium on new developments in asymptomatic ischemia and coronary artery disease presented at the World Congress of Cardiology and at a meeting of the American Heart Association.

Susan Oberbeck-Friedlich, M.S.W., social worker, coauthored an article on the financial impact of cyclosporine for liver transplant patients in *Dialysis and Transplantation.*

Ellison C. Pierce Jr., M.D., chairman of Anaesthesia, was moderator of a discussion group on the status of anesthesia safety activities for the International Committee on Anesthesia Mortality and Morbidity.

Paula Pinkston, M.D., pulmonary disease, has joined the Department of Medicine.

Arturo R. Rolla, M.D., endocrinologist, spoke on differential diagnosis of hypercalcemia, treatment of hyperparathyroidism and osteoporosis, and on dermatological changes in diabetes to the Brazilian Congress of Endocrinology and Metabolism.

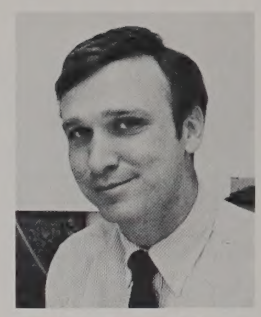
Paul Sesin, Pharm.D., R.Ph., coordinator of pharmacy clinical services, spoke on antibiotic cost containment during the prospective payment era at Manchester (Connecticut) Memorial Hospital.

Jayne Sheehan, R.N., School of Nursing instructor, has been certified as an adult nurse practitioner by the American Nurses Association.

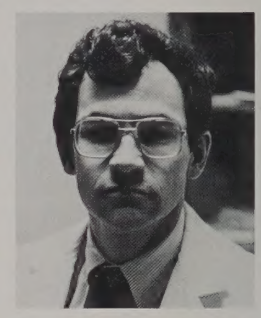
Alison Sneider, director of Public Relations, accepted two Touchstone awards at the annual meeting of the American Hospital Marketing and Public Relations Association. The awards were given for the hospital's employee AIDS education program and for the 90th anniversary videotape.

John L. Waciuma, M.D., cardiothoracic surgeon, has joined the Department of Surgery. Previously NEDH chief thoracic surgery resident, he will be affiliated with the Overholt Thoracic Clinic.

Mary Wood, Cancer Research Institute, received a grant to study the role of channel blockers as an immunosuppressive agent in skin transplantation.



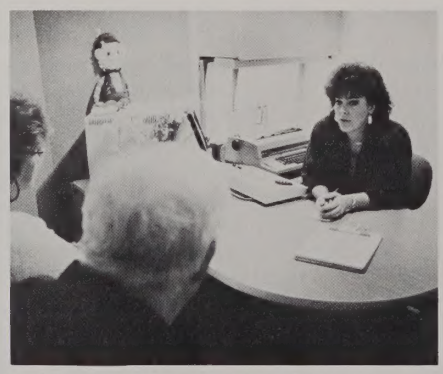
Frank A. Greco, M.D.



Dean F. Markham Jr., M.D.

John L. Waciuma, M.D.

New Admitting area welcomes patients (see page 2)



Barbara Degrenier, admitting officer, takes patient information in a new interview room.

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